

Issue Classification			Application No.		Applicant(s)	
			09/229,898		ROWE ET AL.	
			Examiner		Art Unit	
			Lance W. Sealey		2671	

ORIGINAL			CROSS REFERENCE(S)					
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
345	420	382	154					
INTERNATIONAL CLASSIFICATION								
G	0	6	T	17/00				
				/				
				/				
				/				
				/				
Lance W. Sealey 10/4/04 (Assistant Examiner) (Date)			MARK ZIMMERMAN SUPERVISORY PATENT EXAMINER TECHNOLOGY CENTER 2600 (Primary Examiner) (Date)				Total Claims Allowed: 236	
(Legal Instruments Examiner) (Date)			O.G. Print Claim(s) 1	O.G. Print Fig. 2				

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
1	1	23	31	53	61	83	91
2		24	32	54	62	84	92
3		25	33	55	63	85	93
4		26	34	56	64	86	94
5		27	35	44	65	87	95
6		28	36	45	66	88	96
2	7	29	37	57	67	89	97
3	8	30	38	58	68	90	98
4	9	31	39	59	69	91	99
5	10	32	40	60	70	74	100
6	11	33	41	61	71	75	101
7	12	16	42	62	72	92	102
8	13	17	43	63	73	93	103
9	14	34	44	64	74	94	104
10	15	35	45	65	75	95	105
11	16	36	46	66	76	96	106
12	17	37	47	67	77	97	107
13	18	38	48	68	78	98	108
14	19	39	49	69	79	99	109
15	20	40	50	70	80	100	110
16	21	41	51	71	81	101	111
19	22	42	52	72	82	102	112
20	23	43	53	73	83	103	113
24		46	54	76	84	104	114
25		47	55	77	85	105	115
26		48	56	78	86	108	116
27		49	57	79	87		117
28		50	58	80	88	109	118
21	29	51	59	81	89	110	119
22	30	52	60	82	90	111	120

Issue Classification	Application No.	Applicant(s)
	09/229,898	ROWE ET AL.
Examiner	Art Unit	
	Lance W. Sealey	2671

ISSUE CLASSIFICATION

ORIGINAL		CROSS REFERENCE(S)								
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)							
345	420	382	154							
INTERNATIONAL CLASSIFICATION										
G	0	6	T	17/00						
				/						
				/						
				/						
				/						
<i>LWP</i>										
Lance W. Sealey 10/4/04 (Assistant Examiner) (Date)									Total Claims Allowed: 236	
(Legal Instruments Examiner) (Date)				(Primary Examiner)		(Date)			O.G. Print Claim(s)	O.G. Print Fig.
									1	2

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
188	211	216	241		271		301
225	212	217	242		272		302
226	213	218	243		273		303
189	214	219	244		274		304
190	215	220	245		275		305
191	216	221	246		276		306
192	217	222	247		277		307
193	218	223	248		278		308
194	219	224	249		279		309
195	220	229	250		280		310
196	221	233	251		281		311
197	222	234	252		282		312
198	223	235	253		283		313
199	224	236	254		284		314
200	225		255		285		315
203	226		256		286		316
204	227		257		287		317
205	228		258		288		318
206	229		259		289		319
207	230		260		290		320
208	231		261		291		321
209	232		262		292		322
210	233		263		293		323
211	234		264		294		324
201	235		265		295		325
202	236		266		296		326
212	237		267		297		327
213	238		268		298		328
214	239		269		299		329
215	240		270		300		330